



HAWAII STATE ETHICS COMMISSION  
1001 BISHOP STREET, ASB TOWER 970  
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STATE OF HAWAII  
STATE ETHICS COMMISSION

## LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

<b>PART I LOBBYIST</b>			
NAME(Last)	(First)	(Middle)	TELEPHONE
Brown	Charles	R	808.524.4600 ex:234
MAILING ADDRESS (Street)			FAX
810 Richards St., Suite 810			
(City)	(State)	(Zip Code)	
Hon.	Hi	96813	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Aston Hotels and Resorts Hawaii			808.931.1400
MAILING ADDRESS (Street)			FAX
2155 Kalakaua Ave., Suite 500			
(City)	(State)	(Zip Code)	
Honolulu	Hi	96815	

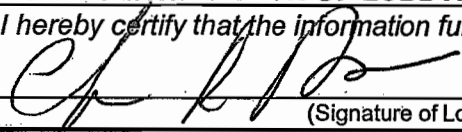
<b>PART II ORGANIZATION</b>		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
Aston Hotels and Resorts Hawaii		808.931.1400
MAILING ADDRESS (Street)		FAX
2155 Kalakaua Ave., Suite 500		
(City)	(State)	(Zip Code)
Hon.	Hi.	96815
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
Mr. Kelvin Bloom, President		808.931.1400
MAILING ADDRESS (Street)		FAX
2155 Kalakaua Ave., Suite 500		
(City)	(State)	(Zip Code)
Hon.	Hi.	96815

**PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY**

<input type="checkbox"/> Agriculture	<input type="checkbox"/> Education	<input type="checkbox"/> Human Services	<input checked="" type="checkbox"/> Science, Technology & Economic Development
<input type="checkbox"/> Communications & Public Utilities	<input type="checkbox"/> Government Operations & Finance	<input type="checkbox"/> Intergovernmental Relations, International Affairs	<input checked="" type="checkbox"/> Tourism & Recreation
<input type="checkbox"/> Consumer Protection & Commerce	<input type="checkbox"/> Hawaiian Affairs	<input type="checkbox"/> Labor & Employment	<input type="checkbox"/> Transportation
<input type="checkbox"/> Culture, Arts, Historic Preservation	<input type="checkbox"/> Health	<input type="checkbox"/> Planning, Land & Water Use Management	<input type="checkbox"/> Other: (indicate below)
<input type="checkbox"/> Ecology, Energy Environmental Protection	<input type="checkbox"/> Housing	<input type="checkbox"/> Public Safety & Corrections	

**PART IV CERTIFICATION OF LOBBYIST**

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.



(Signature of Lobbyist)

3/1/05  
(Date)

**PART V AUTHORIZATION TO LOBBY**

NAME

TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED

Kelvin Bloom, President

NAME OF ORGANIZATION (if applicable)

TELEPHONE

Aston Hotels and Resorts Hawaii

808.931.1400

MAILING ADDRESS (Street)

FAX

2155 Kalakaua Ave

(City)

(State)

(Zip Code)

Hon.

Hi.

96815

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.

  
(Signature of Authorizing Officer or Person Represented)

3.15.05  
(Date)